

WATER WELL REPORT

Application No

STATE OF WASHINGTON

Permit No

(1) OWNER Name Cumana Island Water Assn. Address 1283-S. Elder Bay Rd. Cumana Island NE 1/4 Sec 19 T 31 N R 3E WM

(2) LOCATION OF WELL County

Bearing and distance from section or subdivision corner

(3) PROPOSED USE Domestic ☐ Industrial ☐ Municipal ☐
Irrigation ☐ Test Well ☐ Other ☐

(4) TYPE OF WORK Owners number of well (if more than one)
New well ☒ Method Dug ☐ Bored ☐
Deepened ☐ Cable ☒ Driven ☐
Reconditioned ☐ Rotary ☐ Jetted ☐

(5) DIMENSIONS Diameter of well 8 inches
Drilled 260 ft Depth of completed well 260 ft

(6) CONSTRUCTION DETAILS

Casing installed 8 Diam from 0 ft to 260 ft
Threaded ☐ Diam from ft to ft
Welded ☐ Diam from ft to ft

Perforations Yes ☐ No ☒

Type of perforator used
SIZE of perforations in by in
perforations from ft to ft
perforations from ft to ft
perforations from ft to ft

Screens Yes ☒ No ☐

Manufacturer's Name Johnson
Type Stainless Steel Model No.
Diam 6" PS Slot size .050 from 227.1 ft to 235.4 ft
Diam 6" PS Slot size .025 from 245.4 ft to 250.6 ft
Diam 6" PS Slot size .030 from 250.6 ft to 255.9 ft

Gravel packed Yes ☐ No ☒ Size of gravel
Gravel placed from ft to ft

Surface seal Yes ☒ No ☐ To what depth? 22 ft
Material used in seal Bentonite
Did any strata contain unusable water? Yes ☐ No ☒
Type of water? Depth of strata
Method of sealing strata off

(7) PUMP Manufacturer's Name
Type HP.

(8) WATER LEVELS Land-surface elevation 230 ft
above mean sea level
Static level 211 ft below top of well Date 9-20-84
Artesian pressure lbs per square inch Date
Artesian water is controlled by (Cap valve etc)

(9) WELL TESTS Drawdown is amount water level is lowered below static level
Was a pump test made? Yes ☒ No ☐ If yes by whom? JRC/Asso
Yield 137.5 gal/min with 8.35 ft drawdown after 24 hrs
137.5 7.93 10.5
137.5 7.22 1

Recovery data (time taken is zero when pump turned off) (water level measured from well top to water level)

Time	Water Level	Time	Water Level	Time	Water Level
0 MIN	219.35	60	215.05	240	214.73
1	211.74	100	214.96	1342	214.31
10	215.27	200	214.79		

Date of test 9-20-84
Bailer test gal/min with ft drawdown after hrs
Artesian flow gpm Date
Temperature of water Was a chemical analysis made? Yes ☒ No ☐

(10) WELL LOG

Formation Describe by color, character size of material and structure and show thickness of aquifers and the kind and nature of the material in each stratum penetrated with at least one entry for each change of formation

MATERIAL	FROM	TO
Till - Grey - Rocky	0	25
Brown Silty Sand	25	170
Dry medium Sand	170	194
Cemented Gravel	194	206
Brn Gravel w/ soft clay	206	227
Sand w/ gravel some water	227	236
Sand w/ clay some gravel	236	243
Grey coarse Sand - water	243	256
Grey clay w/ Bits of wood	256	260

Work started 8-24 1984 Completed 9-19 1984

WELL DRILLER'S STATEMENT

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief

NAME Burt Well Drilling, Inc.
(Person firm or corporation) (Type or print)

Address 19782 N.E. Lincoln Pk. Bldg 985

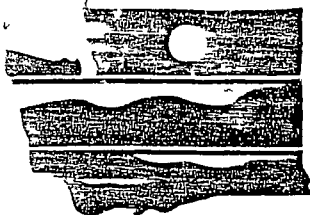
[Signed] George R. Burt
(Well Driller)

License No 0048 Date 9-29 1984

48093112282901

well 5

(USE ADDITIONAL SHEETS IF NECESSARY)



WASHINGTON STATE
DEPARTMENT OF
ECOLOGY

Well Tagging Form

Unique Well Tag No: ABR 375

RECORD VERIFICATION (check one)

- ☐ Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)
- ☐ Verification inconclusive
- ☐ Well Report not available
- Cell #5*

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name Camano W. Goss Last Name 10750

Street Address _____

City _____ State _____

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address ON 'T' AT FAIRWAY / CRESTVIEW RD

City _____ County _____

T _____ N R _____ WM Sec _____ 1/4 of the _____

FOR AGENCY USE ONLY

Latitude _____

Longitude _____

Elevation at land surface _____ feet/meters (circle one)

Additional information, if available

- ☐ Location marked on topographic map (please attach)
- ☐ Location marked on air photo (please attach)

- ☐ GPS
- ☐ Topographic Map
- ☐ Survey
- ☐ Computer generated
- ☐ Digital Altimeter
- ☐ Topographic Map
- ☐ Other _____

The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.

FOR AGENCY USE ONLY

WELL CHARACTERISTICS

Physical Description of well (size or casing type or well, housing etc.)

8" CASING INSIDE ~~TO~~ ATTACHED HOUSE (~5' X 3' X 3') TO
10' X 10' X 15' PH, ALL BROWN, SITE ~~DOWN~~ DOWN DIRT
ROAD PAST 2 OCTAGONAL RES

Location or Well identification Tag

Long

Was supplemental tag needed for ease of identifying well?

☐

Yes

☒

No

Where was tag placed?

D	C	B	A
E	F	G	H
M	L	K	J
N	P	Q	R

Scale 1 24 000 (1" = 2 000')

Indicate the location of the well within the Section by drawing a dot at that point.

SECTION _____

Comments

FOR DEPARTMENT OF ECOLOGY WATER RESOURCES PROGRAM ONLY

Permit Right # _____ Date Issued _____

Application Permit Certificate Claim Eyemot